

Oral Health in Action

The Advisory Committee for Oral Health (AC4OH) appointed by Governor Steven Sisolak was formed to support the State of Nevada's Department of Health and Human Services Oral Health Program with a mission to advocate for optimum oral health for all Nevadans.

The Department of Health and Human Services is responsible for protecting, maintaining, and improving the health of all Nevadans, which includes oral health. As demonstrated through numerous studies, oral health is a vital component of overall health. The AC4OH is committed to collaborating with community of dental providers and stakeholders to improve oral health throughout the state and specifically supports partners that can meet the needs of underserved, vulnerable populations.

The effects of unmet dental care are great. Dental caries is the most common chronic childhood disease in the US with nearly half of all five- to nine-year-old children and nearly 80% of all 17-year-olds having experienced at least one cavity or filling.^{1,2} While many dental public health programs, such as fluoridated water and school-based sealant programs, have helped to improve the oral health of Nevada, oral diseases is still a "silent epidemic" affecting some of the state's most vulnerable children.

Nevada's Growing Endodontic Problem

Real Life Consequences:

*Fourteen-year old David presented to a community health center in Nevada to have his teeth looked at. He had fractured multiple teeth due to skateboarding accidents, and teeth were diagnosed as needing either new root canals, or re-treatment of previously completed root canals which were failing. Due to the complexity of the work, he was referred to the endodontist. Unfortunately, because he was a Medicaid recipient, there was only one place in the entire state of Nevada that he could go to for treatment. Both his primary dentist and his mother called multiple times to follow up and coordinate the referral to UNLV. David and his mother traveled to UNLV from Northern Nevada for a consultation and it was decided **he needed three teeth to be treated by root canal therapy.** An appointment was made to complete the treatment a couple months later. In the interim David developed swelling and extreme pain. **An antibiotic was prescribed to temporarily relieve the infection until the treatment could be completed.** It will have taken over four months to get the treatment completed, during which **David has been suffering pain and infection,** which could have been eliminated with the proper timely treatment.*

According to the 2017 Kids Count Data Center, in Nevada, 53% of children live in or near the federal poverty level and are at an increased risk of having untreated tooth decay. According to the Annual EPSDT Participation Report Form CMS-416, only 33.7% of Nevada's Medicaid eligible children under 21 years of age received any form of dental service in 2015. This is 11.1% lower than the national average.

All 17 counties in Nevada have some type of shortage designation, due to very high ratios of population to provider. In urban areas, poverty is also a significant factor in shortage designation, because many providers do not accept Medicaid.

¹ U.S. Department of Health and Human Services. Oral Health in America: A Report of the Surgeon General. Rockville, MD: U.S. Department of Health and Human Services, National Institute of Dental and Craniofacial Research, National Institutes of Health, 2000. 2000.

² CDC. Oral Health - At a Glance 2011. National Center for Chronic Disease Prevention and Health Promotion - Division of Oral Health; 2011.

While many barriers to general dental care exist for a sizeable portion of the population, these barriers may be greater when specialty care such as endodontics, orthodontics, oral surgery, or advanced patient management is necessary due to higher costs, higher complexity and fewer available providers.^{3,4,5}

The definition of endodontics is the diagnosis, prevention and/or treatment of the nerve tissue of the tooth resulting from an infection or inflammation due to deep tooth decay, a chip or a crack in the tooth, dental terminology is an apical periodontitis. Endodontists are specialists in this area of dentistry. The most common treatment performed by endodontists is Root Canal Treatment. This treatment option is essential to help patients maintain their teeth for a lifetime in health, function and esthetics, and is often rendered on teeth with active infections. Often times, dental patients who are in need of endodontic treatment experience a great level of pain from the active infection.

Nevada is limited on the number of endodontists who treat Medicaid recipients. Currently, there is only one endodontist statewide that is enrolled in the Medicaid program compared with the 51 who are enrolled in commercial insurance [cite]. This endodontist is located at the University of Nevada, Las Vegas School of Dental Medicine (UNLV SDM). Additionally, there are six providers that accept single case agreements for Medicaid. These single case agreements offered through Liberty Dental Plan with an arrangement for a reimbursement rate that is higher than the Medicaid fee schedule.

Although the reimbursement rates within Nevada Medicaid for endodontic related procedures align with those of other states, low reimbursement rates are a widely noted concern preventing providers from enrolling into the Medicaid program. Low reimbursement rates coupled with the administrative burden many providers face within the Medicaid system create a dire situation.

In 2007, the issue of access to dental care was brought to national attention through the tragic case of Deamonte Driver.⁶ Deamonte was a 12-year-old Maryland boy who developed a tooth infection, a condition readily treated by a root canal or an extraction. After failing to receive dental care when his Medicaid coverage lapsed, the infection spread to his brain. Two emergency brain surgeries and six weeks in the hospital failed to prevent his tragic death. Unfortunately, he is not the only person who has died from an odontogenic infection.^{7,8}

As the need for endodontist continues to grow for adolescence in Nevada, AC4OH and members of the community have been coming together to explore ways to prioritize this issue. The goal is to proactively address provider shortages and develop innovative approaches to improve access to endodontic services.

Solutions to Improve Access to Care

1. Short Term Solutions:

- Single case agreements.
- Scholarship for \$300 service fee for Northern Nevada Dental Health Program.

³ Manski RJ, Moeller JF. Use of dental services: an analysis of visits, procedures and providers, 1996. J Am Dent Assoc 2002;133(2):167-175.

⁴ Rhodes KV, Bisgaier J. Limitations in access to dental and medical specialty care for publicly insured children. LDI Issue Brief 2011;16(7):1-4.

⁵ Sharpe G, Durham JA, Preshaw PM. Attitudes regarding specialist referrals in periodontics. Br Dent J 2007;202(4):E11; discussion 218-219.

⁶ Otto M. For Want of a Dentist. The Washington Post 2007 February 28, 2007;Sect.

⁷ Clarke JH. Toothaches and death. J Hist Dent 1999;47(1):11-13.

⁸ Aldous JA, Powell GL, Stensaas SS. Brain abscess of odontogenic origin: report of case. J Am Dent Assoc 1987;115(6):861-863.

2. Long Term Solutions:

- Continuing education courses to train general dentists and pediatric dentists to perform pulpotomies, which can alleviate the need for complete endodontic treatment and save tooth structure.
- Increased reimbursement rate for endodontic services.
- Create a co-pay for CHIP recipients receiving endodontic services.

Vital Pulp Therapy

Vital pulp therapy (VPT) is a cost-effective alternative to root canal therapy (RCT). This conservative approach is an alternative way for general dentists to treat symptomatic teeth, and it addresses Nevada's shortage of Endodontic Specialists. VPT will improve dental health outcomes by providing conservative treatment options through advanced dental care by general dentists.

Liberty Dental Pilot - Vital Pulp Therapy Education

LDP sponsored for 10 providers to take a 4 hour course with Dr. Lemon at UNLV. It was one session. We paid for the participant flight and hotel for our providers from Reno. At the course everyone was interested in trying the procedure and needing to order the materials. We increased their pulpotomy fees to \$70 to incentivize providers to do this procedure. Out of the 10 providers – we had 3 submit cases to us (less than 10 cases each) and the rest have not attempted the procedures for a couple reasons- case selection, comfort level of endo treatment, and not having the materials to use. We are looking to add another group of providers to this pilot.

In 2020, Liberty Dental Plan (LDP) in Partnership with UNLV SDM developed an initiative that targets dental offices with the highest endodontic referrals in the LDP network with the aim of reducing the incidence of root canals for Nevada Medicaid population.

Dental Provider Shortage

- 2018: 20% of licensed Nevada dentists are enrolled in Liberty Dental plan.
- 2018: 56% or 1,121 licensed Nevada dentists were enrolled in Nevada Medicaid with a single claim within the last two years.
- 2018: 25 dental hygienists who hold a public health dental hygiene endorsement and enrolled in Nevada Medicaid.

“The ADA believes that Medicaid plays an essential role in a state’s oral health care safety net and is committed to ensuring that families have access to comprehensive and affordable health coverage, including oral health care coverage.”

Other Nevada Medicaid Facts

In 2016, Nevada Medicaid financed 64% of births in the state, ranking Nevada’s Medicaid birth rate as the 5th in the nation.

During the 2018-2019 school year, 51% of students were enrolled in Medicaid.